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## BIB DATA SHEET

CONFIRMATION NO. 5774

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/566,429	01/31/2006	604	3771	03500.123386.		
<b>RULE</b>						
<b>APPLICANTS</b> Masaya Kobayashi, Yokohama-shi, JAPAN; Kenichi Sekine, Kodama-gun, JAPAN; Toshiyuki Nobutani, Yokohama-shi, JAPAN; Mitsuru Imai, Chichibu-shi, JAPAN; <b>** CONTINUING DATA *****</b> This application is a CON of PCT/JP05/14361 07/29/2005 <b>** FOREIGN APPLICATIONS *****</b> JAPAN 2004-225510 08/02/2004 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 07/20/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>	<b>INDEPENDENT CLAIMS</b>
Verified and /CLINTON T OSTRUP/ Acknowledged Examiner's Signature		Initials	JAPAN	9	12	1
<b>ADDRESS</b>						
FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112 UNITED STATES						
<b>TITLE</b>						
Liquid medication cartridge and inhaler using the cartridge						
<b>FILING FEE RECEIVED</b> 1360	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			